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## **REVOCATION OF POWER OF** ATTORNEY WITH **NEW POWER OF ATTORNEY** AND

Application Number	10	555	5,105	
Filing Date	12	12	06	
First Named Inventor	W.	And	dersch	
Art Unit				
Examiner Name				
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CHANGE OF CORRESPONDENCE ADDRESS Attorney Docket Number

I hereby revoke all pre	I hereby revoke all previous powers of attorney given in the above-identified application.				
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A Power of Attorney is submitted herewith.					
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Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Signature / / / / / / / / / / / / / / / / / / /					
Name Jack // B. Nowah					
Date W	23. Sep. 2008	Telephone			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
*Total offorms are submitted.					

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